



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/529,323
Applicant: Axel Hinz et al.
Filed: 03/25/2005
Title: HYDRAULIC UNIT FOR ANTI-SLIP BRAKING SYSTEM
TC/A.U.:
Examiner:
Confirmation No.:
Docket No.: PC10509US

STATUS REQUEST

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The status of the above-identified application is respectfully requested.

The above-referenced application was filed on March 25, 2005, however, to date we have not received the Official Filing Receipt.

Respectfully submitted,

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CAR/dhm

Dated: January 18, 2006

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January 18, 2006



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PTO/SB/21 (09-04) (AW 10/2004)

Approved for use through 7/31/2006. OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence, after initial filing)</i>	Application Number	10/529,323
	Filing Date	03/25/2005
	First Named Inventor	Axel Hinz et al.
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket No.	PC10509US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
Signature			
Printed Name	Christopher A. Rothe		
Date	1/18/2006	Registration No.	54,650

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